



Veterans Affairs Request for Tuition Deferment

Student Name: _____ Student ID Number: _____

Address: _____

READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS DOCUMENT:

1. I am eligible for VA education benefits and request a deferment of my college tuition for term _____ year _____. I understand that my failure to pay by the designated due date will result in my being administratively withdrawn from all classes. If this occurs, the debt to the college will remain, and the VA will reclaim any education benefits payable for the term. **I understand that the last date to pay my fees is _____.**
2. In the event that I do not receive funding from the VA by the due date, I am still responsible for paying this deferment in full by the due date stated on this form.
3. I understand that any outstanding balances will be reported to collections and I will then be responsible for the outstanding balance as well as any collections fees.
4. I understand that if my fees are not paid in full by the due date listed on this form I forfeit eligibility to receive a VA deferment for any future semesters at FKCC. I also understand that my grades and transcripts will not be released until all fees have been paid.
5. In the event that my enrollment status changes during the add/drop period I will immediately notify the school certifying official and will update this deferment request form with Business Services.
6. **Amount of deferment \$ _____**

STUDENT Signature

Date

Financial Aid & Veterans Affairs

Date

Business Services

Date